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| | |
|------------------------|---------------------|
| Application Number | 10/706,630 |
| Filing Date | 11/12/2003 |
| First Named Inventor | Marguerite McDonald |
| Art Unit | 3738 |
| Examiner Name | Unknown |
| Attorney Docket Number | 2900004-000002 |

I hereby revoke all previous powers of attorney given in the above-identified application.☐ A Power of Attorney is submitted herewith.**OR**☒ I hereby appoint the practitioners associated with the Customer Number: 000044777☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
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☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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